

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

**10/524134**

<b>1 Date of Request:</b> _____		<b>2 Serial/Patent #</b> _____		
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3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
<b>7 TOTAL AMOUNT OF REFUND</b>			\$

<b>10 REASON:</b>	
Overpayment	
Duplicate Payment	
No Fee Due (Explanation):	

<b>8 TO BE REFUNDED BY:</b>	
Treasury Check	
Credit Deposit A/C #:	9
<div style="display: flex; justify-content: space-around; width: 100px;"> <span> </span><span> </span><span> </span><span> </span><span> </span><span> </span><span> </span><span> </span><span> </span><span> </span> </div>	

<b>11 REFUND REQUESTED BY:</b>	
<b>TYPED/PRINTED NAME:</b> _____	<b>TITLE:</b> _____
<b>SIGNATURE:</b> _____	<b>PHONE:</b> _____
<b>OFFICE:</b> _____	

\*\*\*\*\*Adjustment Date: 06/07/2006 \*\*\*\*\*

02/17/2005 GREY1 00000077 503013 10524134

02 FC:26.32 250.00 CR

**THIS SPACE RESERVED FOR FINANCE USE ONLY:**

**APPROVED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*